



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

ELECTIONS
COMMISSION

Commonwealth
of Massachusetts

File with:
City or Town Clerk or Election Commission

2014 JAN 21 P 1:31

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 10 Date 19 Year 2013 Ending Month 12 Date 31 Year 2013

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Robert F. Sullivan

Full Name of Candidate (if applicable)

city councilor (At-large)

Office Sought and District

4 Rock meadow Drive

Residential Address

Brockton MA 02301

Tel. No. (optional)

Committee to Elect Robert Sullivan

Committee Name

Robert E. Sullivan

Name of Committee Treasurer

4 Rock meadow Drive

Committee Mailing Address

Brockton MA 02301

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 6,002.97

Line 2: Total receipts this period (page 2, line 11) \$ 3,655.00

Line 3: Subtotal (line 1 plus line 2) \$ 9,657.97

Line 4: Total expenditures this period (page 3, line 14) \$ 7,385.85

Line 5: Ending balance (line 3 minus line 4) \$ 2,272.12

Line 6: Total in-kind contributions this period (page 4) \$ 0.00

Line 7: Total (all) outstanding liabilities (page 4) \$ 0.00

Line 8: Name of bank(s) used Rockland Trust

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Robert E. Sullivan

Treasurer's signature (in ink)

1-16-14
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Robert F. Sullivan

Candidate signature (in ink)

1-16-14
Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
10/19	Darche, Michael 403 N. Montello St - Brighton MA	100	00	
10/19	Gomes, Emanuel 10 Bridgewater Ave - Bridgewater MA	100	00	Police Chief City of Brighton
10/19	Greene, John 62 Cliff St - Plymouth, MA	250	00	Herbalist Self Employed
10/28	Juliano, Michael 1324 Belmont St - Brighton MA	200	00	Real Estate Developer Self Employed
10/21	Kelly, Maryanne 636 Crescent St - E Bridgewater MA	100	00	
10/19	Luizzi, Anthony 80 Country Club Ln - Brighton MA	100	00	Retired
10/19	Lum, Ronald 1 Andrea Way - Randolph, MA	100	00	
10/21	Mathews, Robert 1 Summer St - Blackstone MA	300	00	Assistant Amtote International
10/23	McLan, Shaun 221 Oak St #186 - Brighton MA	200	00	Attorney Self Employed
10/19	McNulty, Arthur 44 Tiffany Cir - W Bridgewater MA	100	00	Police Officer City of Brighton
10/21	Morin, Lynn 209 Ramblewood Dr - Raynham MA	200	00	Assistant Carney Environmental
11/5	Rogers, John 186 Aquan Rd - N Attleboro MA	100	00	
10/23	Twahis, John 90 Samuel Ave - Brighton MA	100	00	
Line 9: Total receipts in excess of \$50 (or listed above)		1950	00	
Line 10: Total receipts \$50 and under* (not listed above)		1705	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3655	00	Enter on page 1, line 2

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

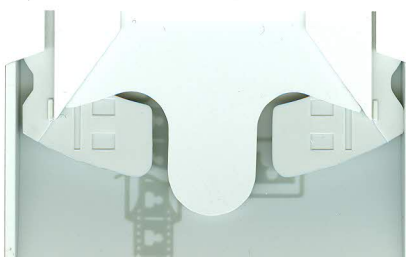
M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/25	Azure media LLC	250 Belmont St. Brocton MA	Campaign Radio Ads	250	00
11/22	Brocton Historical Society	216 N. Pearl St. Brocton, MA	Fundraiser Donation	300	00
10/23	Consolidated mail	98 Reservoir Park Dr Rockland MA	Campaign Bulk mailings	4006	60
11/5	George's Cafe	226 Belmont St. Brocton MA	Election Night Event (food)	469	25
10/26	Hometown Talk Radio	123 Broadway Taunton, MA	Campaign Radio Ads	144	00
10/25	McDonald, Kelly	62 Commercial Wharf Boston, MA	Robo calls (Election Day)	300	00
10/21	Morano, Robert	239 Howard St. Brocton, MA	Campaign Ad (Brocton Best website)	60	00
10/28	Noonan, Frederick	88 Sophia Ave. Brocton, MA	Charity Event Donation	77	00
10/28	Postmaster	Brocton, MA	Campaign Postage	92	00
11/22	Postmaster	Brocton, MA	Campaign Postage	138	00
10/29	Tasger, Jacob	350 Quincy St. Brocton MA	Charity Donation Fundraiser	100	00
11/25	Thorny Lea Golf Club	159 Torrey St. Brocton MA	Inaugural Event (tickets / food)	224	00
12/30	Thorny Lea Golf Club	159 Torrey St. Brocton, MA	Campaign Event	975	00
12/23	United Way of Greater Plymouth County	934 W. Chestnut St. Brocton MA	Campaign Ad (Brocton Parents Magazine)	75	00
Line 12: Expenditures over \$50				7210	85
Line 13: Expenditures \$50 and under*				175	00
Line 14: TOTAL EXPENDITURES				7385	85

Enter on page 1, line 4

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.



SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
—	—	—	—	0.00
Line 15: In-kind over \$50				—
Line 16: In-kind \$50 and under				—
Line 17: Total In-kind				0.00

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
—	—	—	—	0.00
Line 18: OUTSTANDING LIABILITIES (ALL)				0.00

Enter on page 1, line 7

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

